

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop S2-26-12
Baltimore, Maryland 21244-1850



Center for Medicaid and State Operations

Ref: S&C 02-08

DATE: December 21, 2001

FROM: Director
Survey and Certification Group

SUBJECT: Intermediate Care Facilities for Person with Mental Retardation (ICF/MR)
Federal Monitoring and Oversight Survey Data

TO: State Survey Agency Directors
Associate Regional Administrators, DMSO

The purpose of this memorandum is to share with you data that has been collected in conjunction with the ICF/MR Federal Monitoring and Oversight project. To date, we have conducted over 170 comparative reviews in most of the states and the District of Columbia.¹

As you know, soon after the conclusion of each comparative survey, conference calls are scheduled with the Federal Survey Team (FST), staff from the relevant State Survey Agency (SA), and the staff from Centers for Medicare & Medicaid Services (CMS) to review the findings of the surveys and discuss any discrepancies detected. I wanted to take this opportunity to thank you and your staff for participating in these calls and we hope they serve as a useful training tool. CMS is also making use of the findings in the development of the CMS-sponsored surveyor training. We are also considering strategies, other than the traditional classroom-style training, to make continued advances in quality assurance for the population served by ICFs/MR. Additionally, we believe that further analyses will enable CMS to specifically target individual state training needs. We also hope that the findings from this project will highlight the need for possible policy improvements in the ICF/MR program or refinements in the guidance provided to state surveyors.

¹ However, the attached material only reflects data gathered between February through September, 2001.

As you review the attached material, it is important to note that, the analyses of survey results were based on a tag by tag comparison of each team's findings. Those tags for which differences could be reasonably explained were eliminated. Attached, please find:

- A description of the processes used to formulate the data results including a summary of findings;
- **Chart A:** The average number of tags missed between tags cited by the FST and tags that could have been, but were not, cited by the SA at the same facilities where the FST conducted comparative review
- **Chart B:** The distribution of comparative surveys per number of tags missed;
- **Chart C:** The number of tags missed, sorted by Condition of Participation (CoP) area and by Region;
- **Chart D:** The national distribution of tags missed by Condition of Participation area; and
- **Chart E:** Most frequently missed tags (with content explanation).

Subsequent data analysis will be posted on the ICF/MR website, which may be located at <http://www.hcfa.gov/medicaid/icfmr/.htm>. Please contact Linda Joyce (410-786-9378) or Bonnie Perkins (410-786-7639) if you have any questions or concerns with the data or wish to discuss any issues regarding the FST.

Again, thank-you for your participation in this project. We hope it proves valuable to our state partners and more importantly to the beneficiaries we serve.

Action: No action necessary.

Training: No training requirements specified in this memorandum.

/s/

Steven A. Pelovitz

cc: ANCOR: Suellen Galbraith
AHCA: Janice Zalen

Attachments

Data Review - ICFs/MR Federal Monitoring and Oversight Contract
As of September 30, 2001
Cumulative for Contract Year #1

THE PROCESS:

Data has been collected and analyzed on Federal comparative (look-behind) surveys which took place from February 1, 2001, to September 30, 2001, which is the end of the first year for this contract. (The first six weeks of surveys from December 12, 2000, to January 31, 2001 were eliminated to allow for learning curve, start up adjustments, etc.) During this time period (2/1/01 to 9/30/01) the Federal Survey teams (FST) have conducted 170 look-behind surveys, 41 follow-ups and 8 complaint investigations. Geographically these surveys now represent all of the ten CMS regions, most of the states plus the District of Columbia. Comparative data is based on the 170 surveys and extracted from a tag by tag comparison of the State Agency (SA) 2567 and the Federal 2567 for each facility surveyed. Differences in SA and FST citations were compared and those tags for which the difference could be logically, reasonably explained were eliminated. These variables included: client involved in the Federal citation was not part of state sample, situational observation was not present at one or the other survey, incident that occurred and resulted in citation happened after the state survey, staff changed between surveys, etc. This report, therefore, reflects a comparison between FST and SA survey findings for only those remaining tags for which discrepancies could not be explained.

The raw data from these surveys is impacted each month by several variables including the lack of data on any as yet incomplete activities and by the absence of conference calls with state surveying agencies to finalize comparisons. Lacking this final opportunity for comparison explanation in a number of surveys, the data should be considered a work in progress each month; however, the comparison of sample selections, time lines and written documents does provide a reasonably accurate overview of survey results from these contract efforts through each time period.

OVERVIEW OF COMPARATIVE SURVEY RESULTS:

- Total number of Federal comparative surveys held in this time period: **170**
- Total number of tags cited nationally by the FSTs: **1178**
- Total number of tags (deficiencies) that could have been, but were not cited by the SA at the same facilities: **704 or 60%**
- Total number of Conditions of Participation cited by the FST in comparative surveys: **32**
- Total number of Conditions of Participation cited by the SA at the same facilities: **0**
- Total number of Immediate Jeopardies cited by the FST in comparative surveys: **9**
- Total number of Immediate Jeopardies cited by the SA at the same facilities: **1**

SUMMARY OF ATTACHED CHARTS

CHART A: Average Tag Discrepancies Per Survey By Region

Chart A represents the average tag discrepancies between tags cited by the FST and tags that could have been, but were not, cited by the SA at the same facilities where the FST conducted comparative reviews. (Data was insufficient for Region 8.)

- Average tag discrepancies per survey compared nationally: **4.3**
- Average tag discrepancies per survey compared for 9 of 10 Regions: **3.1 to 5.3**

CHART B: Distribution of Comparative Surveys Per Number of Tags Missed

Chart B represents the percentage of the total number of comparative surveys that had tag discrepancies within a particular range between tags cited by the FST and tags that could have been, but were not, cited by the SA at the same facilities where the FST conducted comparative reviews.

- **22%** of the comparative surveys had **0 to 1** tag discrepancies between the FST and SA surveys
- **43%** of the comparative surveys had **2-5** tag discrepancies between the FST and SA surveys
- **18%** of the comparative surveys had **6 - 10** tag discrepancies between the FST and SA surveys.
- **11%** of the comparative surveys had **10+** tag discrepancies between the FST and SA surveys.
- **6%** of the comparative surveys had incomplete data at the time of analysis.

CHART C: Tags Missed by State Survey Agencies Sorted by Condition of Participation (CoP) Area and by CMS Region:

Chart C identifies the number of tags missed by State Survey Agencies, sorted by Conditions of Participation and by Region. (This data is cumulative to date of this report.)

CHART D: National Distribution of Tags Missed by Condition of Participation (CoP) Area:

Chart D represents the total percentage of tags missed by State Survey Agencies sorted by Conditions of Participation. (This data is cumulative to date of this report.)

- **29%** were in the area of Active Treatment
- **37%** were in the area of Client Protections
- **or** more than **two-thirds** of the tags cited by the Federal teams, but not by the SA, were in two areas vital to the safety, well-being and quality of life for the individuals residing in ICFs/MR. Additionally, the percentage of tags missed by State Survey Agencies in the area of Client Protections has increased slightly from 31% to 37% over the past 6 months.

CHART E: Most Frequently Missed Tags

This chart includes the list of most frequently missed tags for each month as well as a cumulative total to date. A page attached to Chart E gives a brief content explanation for each W tag.

CHART E2: Most Frequently Missed Tags With Content Explanation

This chart includes a content explanation of the most frequently missed tags.

SA Training Needs and/or Policy Reviews

A comparison of tags missed by the SAs continues to suggest further monitoring of results at the CoP level by and across regions, particularly in the areas of Client Protections and Active Treatment. Specific policy clarification and/or training may be necessary particularly in those areas related to rights restrictions and guardianship issues; but, there is still minimum data available for such discussions. Current figures continue to substantiate the need for Federal oversight and continued monitoring of survey differences and definitely appear to be pointing the way to possible training needs and/or necessary policy review. This data will continue to be tabulated and analyzed monthly and will be recorded by month and cumulative totals, thereafter.

CHART A
AVERAGE TAGS MISSED PER SURVEY BY REGION
FEBRUARY 1, 2001 TO September 30, 2001
(plotted from 4.3 National average to date)

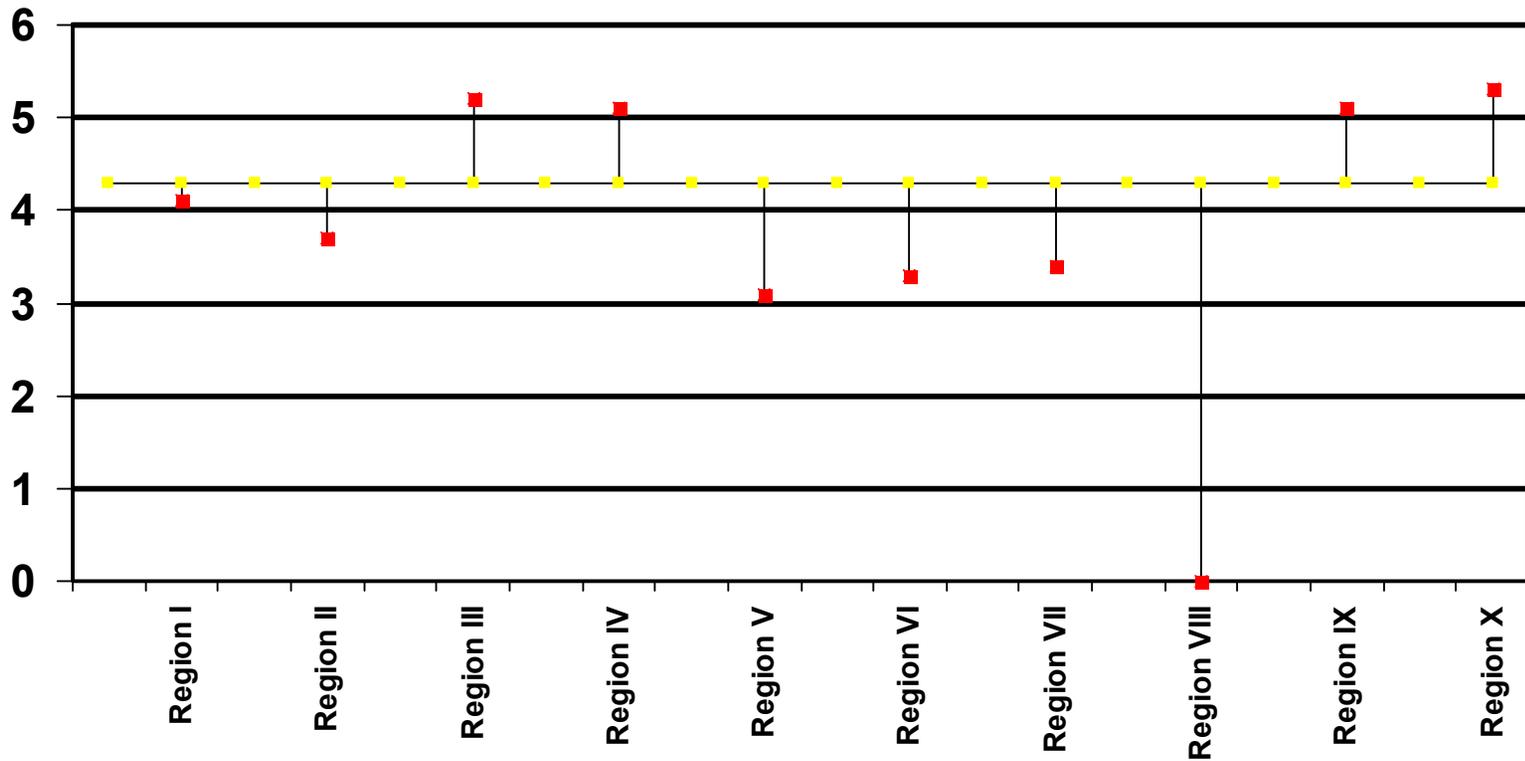


CHART B
Distribution of Surveys Per # of Tags Missed in Each
As of September 30, 2001

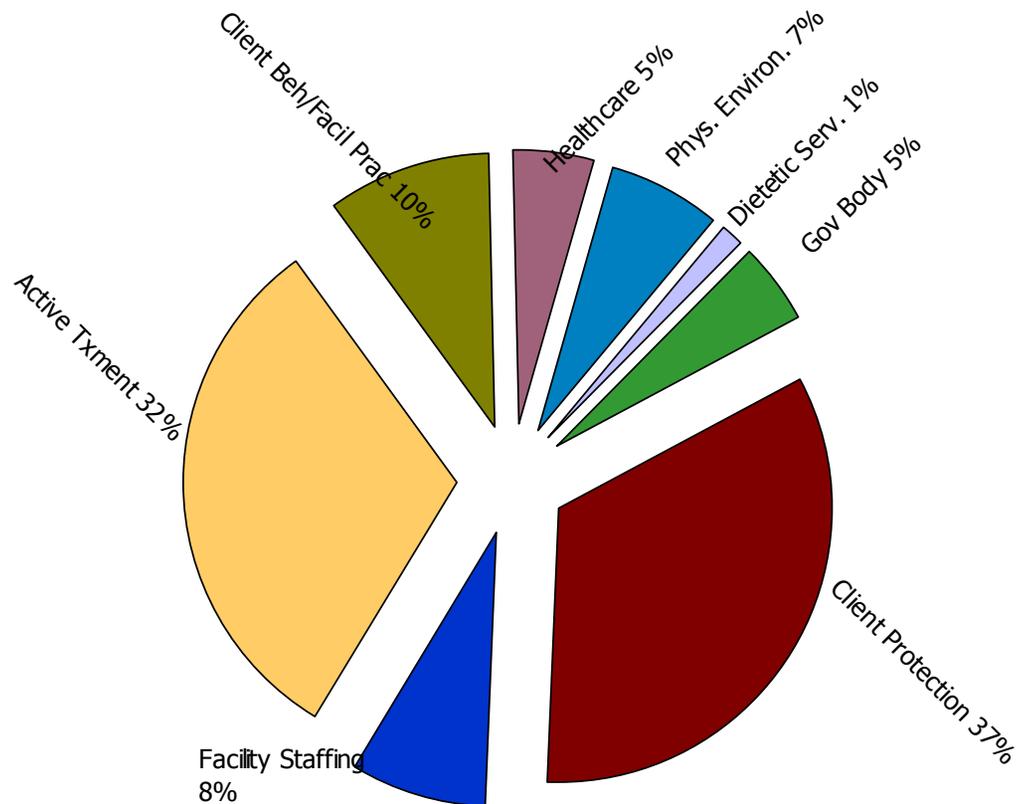
Cumulative 2/01 -9/31/01

Number of tags missed →	0 - 1	2 - 5	6 - 10	10+	
REGION I	2	5	1	0	
REGION II	5	9	3	1	
REGION III	1	5	5	3	
REGION IV	4	10	2	3	
REGION V	9	14	3	1	
REGION VI	9	9	4	4	
REGION VII	2	2	2	1	
REGION VIII	0	0	0	0	
REGION IX	6	16	9	4	
REGION X	0	3	1	0	
Total surveys →	38	73	30	18	
Percentage of Surveys in each category	22%	43%	18%	11%	

CHART C
TAGS MISSED BY CONDITION OF PARTICIPATION AREA SORTED BY REGION
(FEBRUARY 1, 2001 - September 30, 2001)

	Governing Body	Client Protections	Facility Staffing	Active Txment	Client Behav. & Facility Prac.	Healthcare	Phys. Environ.	Dietetic Services	Total Tags
Region									
(# of surveys)									
I (8)	0	10	1	10	5	5	3	0	34
II (23)	2	35	21	15	4	2	5	0	84
III (22)	8	35	3	36	7	4	4	1	98
IV (20)	5	27	8	30	10	10	3	2	102
V (27)	4	39	8	21	6	3	6	1	76
VI (23)	1	15	5	30	14	11	4	1	93
VII (8)	0	11	1	5	4	1	1	1	17
VIII (0)	Insufficient data for comparison								
IX (31)	9	48	7	61	11	24	17	1	178
X (3)	3	4	0	4	4	2	2	2	21
Totals (170)	32	224	54	212	65	62	45	9	704

CHART D
NATIONAL DISTRIBUTION OF TAGS MISSED BY CONDITION OF PARTICIPATION AREA
(FEBRUARY 1, 2001 TO September 30, 2001)



	Feb/Mar	April	May	June	July	August	September	Cumulative
1	W125	W125	W154	W125	W125	W125	W125	W125
2	W262	W371	W371	W263	W154	W264	W154	W154
3	W154	W156	W263	W154	W262	W154	W262	W263
4	W263	W263	W125	W262	W263	W126	W264	W262
5	W130	W154		W120	W264	W137	W249	W156
6	W227			W124	W156	W153	W440	W371
7	W249			W249	W189	W227		W249
8				W371	W440	W240		W227
9						W262		W124
10						W436		W264

Chart E₂

MOST FREQUENTLY MISSED TAGS CONTENT EXPLANATION

W125: EXERCISING RIGHTS

W154: INVESTIGATING ABUSE and/or NEGLECT

W263: INFORMED CONSENT FOR RESTRICTIVE PROGRAMMING

W262: APPROVAL BY SPECIALLY CONSTITUTED COMMITTEE

W156: REPORT INVESTIGATION RESULTS OF ALLEGED ABUSE WITHIN 5 DAYS

W371: CLIENTS ARE TAUGHT TO SELF-ADMINISTER MEDS AS APPROPRIATE

W249: PROVIDE CONTINUOUS ACTIVE TREATMENT

W227: LEARNER-ORIENTED IPP LISTS SPECIFIC OBJECTIVES AS IDENTIFIED BY COMPREHENSIVE FUNCTIONAL ASSESSMENT

W124: CONTINUOUS INFORMATION RE: INDIVIDUAL'S CURRENT OVERALL STATUS, RISK OF TREATMENT AND RIGHT TO REFUSE TREATMENT

W264: COMMITTEE REVIEW OF PRACTICES AND PROGRAMS AS THEY RELATE TO DRUG USAGE, PHYSICAL RESTRAINTS, TIME-OUT ROOMS, BEHAVIOR CONTROL AND PROTECTION OF CLIENT RIGHTS AND FUNDS.